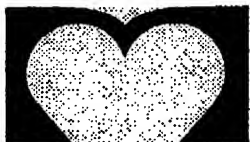


AUG 24 2005



Mortara INSTRUMENT

7865 North 86th Street, Milwaukee, WI 53224 Telephone 414.354.1600 Fax: 414.354.4760
Milwaukee, Wisconsin -- Bologna, Italy -- Essen, Germany -- Utrecht, Netherlands

Facsimile

Fax Number:

703 872 9306

Attention:

George Evancisko

From:

David Mortara

Date:

8/24/05

Subject:

Application 10/785,956

This is page 1 of 4 page(s).

M020 Rev. 1



August 24, 2005

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313
Attn: George Evanisko

Mr. Evanisko,

With reference to our application 10/795,956 and the Office Communication from you dated 7/25/2005, I wish to retain claims 14-20, and accept the withdrawal of claims 9-13.

I write on this matter directly because the filing attorney, J Kuborn, has withdrawn his power of attorney. A copy of his withdrawal letter is attached.

Sincerely,
David Mortara

A handwritten signature in black ink that reads "David Mortara". The signature is written in a cursive style with a large, stylized "D" and "M".

Mortara INSTRUMENT, INC.

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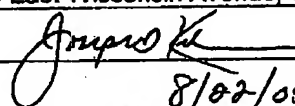
AUG 24 2005


Please type a plus sign (+) inside this box (+)

Patent and Trademark Office: U.S. Department of Commerce

0001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office	Application Number	10/795,956
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Filing Date	March 8, 2004
		First Named Inventor	David W. Mortara
		Group Art Unit	3782
		Examiner Name	Evanisko, George
		Attorney Docket Number	2395-00033
Total Number of pages in this Submission		2	

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement/PTO-1449 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ <input type="checkbox"/> Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication To Technology Group <input type="checkbox"/> Appeal Communication to Board Of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below) <input checked="" type="checkbox"/> RETURN RECEIPT POSTCARD <input type="checkbox"/> _____
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Or Individual Name	Joseph D. Kuborn (Reg. No. 40,689) ANDRUS, SCEALES, STARKE & SAWALL, LLP 100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202
Signature	
Date	8/22/05

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the 22nd day of August, 2005.	
Typed or printed name	Jo Ellen Bullock
Signature	
Date	8-22-05